

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16494 / 16993

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cruz for President

A. Full Name (Last, First, Middle Initial)
MR. BRUCE EUGENE BOWEN
Mailing Address 4406 SARONG DRIVE

City State Zip Code
HOUSTON TX 77096-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
GEOLOGIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.860964

Date of Receipt

M M / D D / Y Y Y Y
12 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MR. BRUCE EUGENE BOWEN
Mailing Address 4406 SARONG DRIVE

City State Zip Code
HOUSTON TX 77096-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
GEOLOGIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Transaction ID : SA17.A860964

Date of Receipt

M M / D D / Y Y Y Y
01 / 31 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

-1000.00

[MEMO ITEM]

REATTRIBUTION TO SPOUSE

C. Full Name (Last, First, Middle Initial)
VICTORIA DAVIS
Mailing Address 4406 SARONG

City State Zip Code
HOUSTON TX 77096-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer
TEXAS CHILDREN'S HOSPITAL

Occupation
R.N.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Transaction ID : SA17.B1025196

Date of Receipt

M M / D D / Y Y Y Y
01 / 31 / 2016

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

REATTRIBUTION FROM SPOUSE

Subtotal Of Receipts This Page (optional).....

0.00

Total This Period (last page this line number only)